

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR INIFORM LIMITED OFFERING EXEMPTION

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	OMB APPE	OVAL		
ON	OMB Number:	3235-0076		
	Expires:			
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hours per response16				

SEC USE ONLY			
Prefix	Serial		
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DATE R	ECEIVED		

UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Brill Street + Company, Inc. Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	07047545
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Brill Street + Company, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 1144 West Randolph Street, Chicago, IL 60607	Telephone Number (Including Area Code) (312) 226-1144
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) same as above	Telephone Number (Including Area Code) same as above
Brief Description of Business Intern staffing solutions provider Type of Business Organization Corporation Itimited partnership, already formed other (p	PROCESSED MAR 2 2 2007
Month Year Actual or Estimated Date of Incorporation or Organization: O 1 O D Actual Estir Burisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THOMSON FINANCIAL
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D (177) Output To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed filed with the U.S. Securities
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20:	549
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually shotocopies of the manually signed copy or bear typed or printed signatures.	
nformation Required: A new filing must contain all information requested. Amendments need only report hereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	rt the name of the issuer and offering, any changes ied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	
his notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa JLOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S re to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for ecompany this form. This notice shall be filed in the appropriate states in accordance with state law. his notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall The Appendix to the notice constitutes a part of
Failure to fits and in the second sec	
Failure to file notice in the appropriate states will not result in a loss of the federal ex appropriate federal notice will not result in a loss of an available state exemption unles filing of a federal notice.	emption. Conversely, failure to file the ss such exemption is predictated on the

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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, , ,	A. BASIC IDENTII	ICATION DATA		
2. Enter the information requested for the followin	g:			
 Each promoter of the issuer, if the issuer has 	as been organized within t	he past five years;		
 Each beneficial owner having the power to v 	ote or dispose, or direct th	e vote or disposition of	f, 10% or more of a	a class of equity securities of the issuer.
Each executive officer and director of corp	orate issuers and of corpo	rate general and mana	ging partners of p	artnership issuers; and
Each general and managing partner of partner	nership issuers.			
Check Box(es) that Apply: Promoter	Beneficial Owner 🔽	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Frej, David				
Business or Residence Address (Number and Street 1144 West Randolph Street, Chicago, IL 6060				
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Lerner, Nancy				
Business or Residence Address (Number and Street 1144 West Randolph Street, Chicago, IL 60607				
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Harris, Mike	,			
Business or Residence Address (Number and Street 1144 West Randolph Street, Chicago, IL 6060)	, City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street	, City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			,	
Business or Residence Address (Number and Street	, City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street	, City, State, Zip Code)			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and Street	, City, State, Zip Code)			
(Use blank she	et, or copy and use additi	onal copies of this she	et, as necessary)	

				B. II	NFORMAT	ION ABOU	T OFFERI	NG				
1. Has tl	ne issuer sol	d, or does tl	ne issuer i	ntend to se	ll, to non-a	ccredited i	nvestors in	this offer	ing?		Yes [No ⊠
					Appendix		_				50	000 00 +
2. What is the minimum investment that will be accepted from any individual?* *The Issuer may, at its discretion, accept subscriptions for less than						s than	\$_50,	* 000.00				
the	minimum the offering	amount.					_				Yes	No
	the informa											
If a pe or stat	ission or sin irson to be list les, list the nater or dealer	sted is an ass ame of the b	sociated pe roker or de	erson or age caler. If mo	nt of a brok ore than five	er or deale (5) persor	r registered is to be list	I with the S ed are asso	EC and/or	with a state		
Full Name N/A	(Last name	first, if indi	ividual)									
Business o	r Residence	Address (N	umber and	d Street, Ci	ity, State, Z	(ip Code)						
Name of A	ssociated B	roker or De	aler	-					· · · · · · · · · · · · · · · · · · ·			
States in V	Vhich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Chec	k "All State	s" or check	individual	States)		****************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***************************************	***************************************		1 States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
		IA N	KS	KY DIG	LA	ME	MD	MA	MI	MN	MS	MO
MT RI	NE SC	NV SD	(NH)	[NJ]	NM UT	NW VT	NC VA	ND WA	(<u>OH)</u> [WV]	OK]	OR WY	PA PR
Full Name	(Last name	first, if indi	ividual)									
Business	or Residence	: Address (1	Number an	d Street, C	ity, State, I	Žip Code)	·					
Name of A	ssociated B	k D	-1		<u> </u>							
	Vhich Person											10
(Chec	k "All State	s" or check	individuai	States)		***************	*************	************	1**************	***************************************	A1	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA NOT	H	ID I
IL MT	IN NE	NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	(Last name	first, if indi	vidual)									
Business	or Residence	Address (1	Number an	d Street. C	lity State	Zin Code)			····			
					,					••••		
Name of A	ssociated B	roker or De	aler									
States in V	Vhich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers	•					
(Chee	k "All State:	s" or check	individual	States)		***************************************	********			.,.,,		l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA		ID D
TL MT	[NE]	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI (OH)	MN OK	MS ÖR	MO PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

I.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	s
	Equity		
	☑ Common ☑ Preferred		
	Convertible Securities (including warrants)	S	S
	Partnership Interests	· 	\$
	Other (Specify)		
	Total	1,000,000.00	\$ 150.000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	,	<u></u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	3	s_150,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$ 5,000.00
	Legal Fees	<u></u>	\$ 5,000.00
	Accounting Fees		· · · · · · · · · · · · · · · · · · ·
	Engineering Fees		ς
	Sales Commissions (specify finders' fees separately)		ss
	Other Expenses (identify) blue sky filing fees	·····	\$ 1,500.00
	Total	·········· 7	11,500.00

	C. OPPERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate and if the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees]\$. 🗆 \$
	Purchase of real estate]\$. D\$
	Purchase, rental or leasing and installation of ma	chinery		
		cilities]\$. 🗆 \$
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass issuer pursuant to a merger)		7¢	п.
			7.\$	
	· - ·			\$ 988,500.00
		ے		
	Total Payments Listed (column totals added)		∑ \$_ 9	88,500.00
(i)		D. FEDERAL SIGNATURE	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	St. 2 (5, 15)
The				
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Commiss	ion, upon writte	
Iss	uer (Print or Type)	Signáture D	ate /	/
Br	Il Strest + Company, Inc.	(Jant tru-	3/8/	07
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)	-/-/-	
Day	id Frei	Chief Executive Officer		

ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)